AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS []ILEC [] Wireless 236263 TYPE: [X]IXC [X]CLEC CERTIFICATED COMPANY INFORMATION FRC, LLC FEIN/SSN Company Name 803-771-7476 Spirit Telecom Telephone # Dba/fka 1500 Hampton Street, Suite 103 Mailing Address Columbia, SC 29201 City, State, Zip Code 1500 Hampton Street, Suite 103 **Business Location** Columbia,SC 29201 __Richland_ County City, State, Zip Code REGISTERED AGENT INFORMATION Registered Agent: M. John Bowen, Jr.. Mailing Address: ____ 1301 Gervais St., 18th Floor____ City, State, Zip Code: Columbia, SC 29201 Pursuant to the Commission's rules and regulations, print or type company contact for the following areas: Grey Humphrey, President, Palmetto Net, inc. (General Manager of FRC, LLC.) A. General Manager (Include address if different than above.) grey.humphrey@palmettonet.com 803-726-4080 803-726-8311 Facsimile Number E-mail Address Telephone Number В. Nicole Price Customer Relations / Complaints Representative (Include address if different than above.) Nicole.price@palmettonet.com /803-726-8311 E-mail Address Facsimile Number Telephone Number Nicole Price C1. Customer Relations/Complaints Representative for Escalated Complaints (Include address if different than above.) /803-726-8311 Nicole.price@spirittelecom.com 803-726-8302 Facsimile Number E-mail Address Telephone Number 1-800-333-2949 C2. **Customer Contact (Toll Free Number)** John Flake D. Engineering Operations (Include address if different than above.)

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E.

Telephone Number

Kevin Comalander

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E-mail Address

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Emergencies (Durir		
800-277-4	/803-726-8311	/ noc@palmettonet.com
Telephone Number	Facsimile Number	E-mail Address
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Allison Mis	hoe, Controller Palmetto Net, Inc. (Gener	ral Manager of FRC,LLC.)
Regulatory Officer	(Include address if different than above	e.)
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Telephone Number	803-726-8328 / 803-726-83 Facsimile Number	E-mail Address
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Interim LEC Fund I		iono Nogino.
interim LEO i and i	P.O. Box 507, Colum	hia SC 29202-0507
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Gross Receipts W		7
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	Luci S. Mackie	Tour S. Mairie
This form was com	ppleted by (print name)	Signature
Director of Accoun	ting & Tax	March 30, 2012
Title		Date
RETU	JRN COMPLETED FORM TO: Public Service Commission of SC	Office of Regulatory Staff
	Docketing Department	Attn: Jeanne Gordon
	Docketing Department	1401 Main Street, Suite 900

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